



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF NATURAL RESOURCES
JEFFREY R. VONK, DIRECTOR

Date: June 21, 2006
To: Snowmobile Program Sponsors
From: David L. Downing, Snowmobile and ATV Program Manager
RE: 2006-2007 SNOWMOBILE TRAIL GRANT & INSURANCE APPLICATIONS/ SIGN ORDER FORM

Enclosed you will find an application for the 2006-2007 snowmobile season trail grant and insurance, and a sign order form. Please review the applications carefully and be sure to complete each section thoroughly. If you need clarification of the rules provided, please contact me prior to completing the application.

The trail grant and insurance applications and sign order form must be received in my office by **4:30 p.m. Monday, July 31, 2006.**

Pre-payments for trail grant funds may be requested after receiving your cooperative agreement from Kathleen Moench with the Budget and Finance Bureau. Bonding is required and must be provided with your request. There is NO need to mail the bond information to me at this time.

Pre-payment rules to remember:

1. Up to 90% of the total grant award can be pre-paid, however, bonding is required in a sum no less than the total pre-payment amount.
2. A signed letter requesting a 90% pre-payment is required before any funds will be sent.
3. Following grant awards, the sponsor must sign and return their grant agreement to the Department prior to receiving any pre-payment.
4. Grant awards are subject to funding availability.

Other rules:

1. The labor rate for club members performing repairs or groomer operation is \$5.50 per hour; any rate paid above this amount will be the responsibility of the club.
2. Groomer storage costs will be reviewed on a case-by-case basis. If approved, there will be a \$200 limit.
3. The review committee will approve groomer labor at \$5.50 per hour only if fund levels are acceptable.

If you know you will have a large repair that you wish to have paid, include this information in your grant request. Please do this even if you have talked to me already. Prior to the state paying for these repairs, I need **three quotes** or attempts at quotes. If there is only one or two shops in your area that can do the work, get a statement from the third or send David something to that effect. This includes parts. David needs to be told of the expense **before** it takes place in order for your club to be reimbursed. The quote/bidding process is required under state rules.

Contact David Downing with any questions at 515/281-3449.

DEADLINE for applications and forms is **4:30pm, Monday, July 31, 2006.**

2006-07 IOWA SNOWMOBILE COST-SHARE PROGRAM
DIRECTIONS AND EXPLANATIONS FOR SNOWMOBILE TRAIL GRANT FUNDS AND
INSURANCE

These directions are to help you in preparing your trail grant funds and insurance applications for the next snowmobile season. To be eligible, your applications must be in this office no later than 4:30 p.m. July 31, 2006. Also enclosed is a "Snowmobile Trail Sign Order" form that should be returned with your trail grant and insurance applications. **Please keep sign orders reasonable.** If you have questions call David Downing at 515/281-3449.

The following is the process required for applying for snowmobile funds and insurance:

1. A sponsor can be a governmental subdivision (counties or cities) or incorporated organizations. The first step will be to identify who your local program sponsor will be for next year.
2. Insurance application forms are included with your trail grant application, these must be filled out completely and mailed back to the Department. The premiums will be paid directly by the Department.
3. Identify your snowmobile trails on a GPS unit per Department directions. Each club must provide a GPS map of their trails to be eligible for grant funding.
4. Trails must be open to the public for a club to participate in the grant program and receive funds and signs from the program.
5. Be certain you have approval from the County Board of Supervisors for trails along county roads and that the County Engineer is aware of trails in county road ditches; and that the Iowa Department of Transportation District Engineer has approved your trails in state highway ditches. Securing these approvals is the responsibility of the sponsoring organization.
6. Complete the front and backsides of the application form. **If the address shown is not for the officer who has signed the application, please note whose address it is.** If justification or explanation is necessary to explain a specific request, please provide enough information for the grant review and selection committee to help them understand the need for your request. **Be sure to check the addition and to add up all elements of the grant request for TOTAL line.**
7. Complete any agreements that may be necessary between the local snowmobile club or association and any involved governmental subdivision.
8. If an incorporated private organization (snowmobile club) is the sponsor, your club chair and treasurer are required by the state administrative rules to be bonded if you wish to receive pre-payment. Kathleen Moench with the Budget and Finance Bureau will request this information when the agreement for funding is sent to you.
9. Mail your applications to: David Downing, Snowmobile and ATV Program Manager, Department of Natural Resources, Wallace State Office Building, Des Moines, Iowa 50319-0034.
10. **The following are required in order to be considered eligible for trail grant funds:**
 - Completed trail grant application
 - Completed insurance application forms
 - Completed sign order form
 - Minutes from official board meeting approving the submission of the trail grant application
 - Detailed GPS maps indicating the primary and secondary trails you groom.

SNOWMOBILE TRAIL GRANT APPLICATION 2006/2007

This trail grant application constitutes a formal request for a cooperative agreement to acquire, develop or maintain snowmobile trail grooming equipment or trail facilities. **Due Monday 4:30pm, July 31, 2006.**

Return to:

David Downing
Department of Natural Resources
Wallace State Office Building
Des Moines, IA 50319-0034
Phone 515-281-3449

Submitted By:

				Date: ____/____/____
Agency or Club Name				
Corporation #				
Street or P.O. Box		City	State	Zip
Signature of Chairperson or President			Name of Chairperson or President	
(H) _____	(W) _____	_____		
Phone Number		E-mail		
Alternate Contact Information (include name, address, telephone & e-mail information)				

List County(s) Covered by trail operations

Miles of Primary Trail: _____ Miles of Secondary Trail: _____

GROOMER INFORMATION

(if applicable)

Groomer Make & Model Number: _____ Year of Groomer: _____

Serial No.: _____ Hours on Groomer: _____

Owned By: _____ Operated By: _____

If you want/need a new groomer check here _____. Attach justification for this.

Leasing equipment to groom snowmobile trails is an option for clubs without groomers. Grant funds can be used to lease snowmobile trail grooming equipment for actual per hour cost for the machine up to \$50 / hour.

LEASE INFORMATION

(if applicable)

Equipment Make & Model Number: _____ Equipment Owner: _____

Operated By: _____ Lease Dates: _____
(from) (to)

Equipment Owner Contact Information: (include name, address, telephone & e-mail information)

Operational Expenses

Operator wages \$ _____ Gas \$ _____ Maintenance \$ _____

Operation Expense Total: \$ _____

Trail Development Expenses

Fence Openings No. _____ Amount \$ _____

Gates No. _____ Amount \$ _____

Temporary Bridges..... No. _____ Amount \$ _____

Permanent Bridges No. _____ Amount \$ _____
(Actual Material Cost and Installation Up To Amount Approve by the Review and Selection Committee)
(Attach Explanation and Location Maps)

Easements No. _____ Amount \$ _____
(Actual Cost Approved by Committee)

Other Items No. _____ Amount \$ _____
(List & Explain)

Trail Development Expense Total: \$ _____

Insurance

Need program liability insurance: YES _____ NO _____ (**Insurance to be direct paid by the Department**)

Number of Clubs to be insured: _____ List Club names _____

Totals

Operation and Trail Development Request Total: \$ _____

A copy of the bond isn't necessary at the time of the trail grant application. Kathleen Moench will ask for this when she sends you the cooperative agreement.

Snowmobile Trail Sign Order Form

Club Name: _____

Shipping Address (NO PO Box): _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Email:** _____

[illegible]



DALE G. VAGTS
V & V INSURANCE AGENCY, INC
P.O. BOX 159
CRESCO, IOWA 52136

PHONE: 563-547-2161
FAX: 563-547-2046
E-MAIL: insurance@vandvins.com
WEBPAGE: www.vandvins.com

SNOWMOBILE INSURANCE FORM DIRECTIONS

Enclosed with these directions is the application for your snowmobile club liability insurance. Thanks for your help and commitment to a safe snowmobile trail program. Hopefully, we will have continued success with good, safe snowmobile activities and keep our losses at a minimum.

Item #1: Answer all questions on the application. Make sure your mailing address is correct. **WE MUST HAVE A DAYTIME CONTACT TELEPHONE NUMBER.** The application and additional insureds list must be typewritten because we rely on the FAX MACHINE. Handwritten pen or pencil is difficult to read. (You may use your computer and either scan our application or make your own form using our format). **DO NOT SEND PAYMENT, THIS IS BEING PAID DIRECTLY BY THE DEPARTMENT. COVERAGE IS NOT BOUND UNTIL APPLICATION IS RECEIVED, QUOTED AND ACCEPTED BY EMC UNDERWRITERS LLC AND PREMIUM PAYMENT IS RECEIVED AT V & V INSURANCE AGENCY. THERE IS NO AUTOMATIC COVERAGE**

Item #2: We need a current additional insureds list each year with the application. **DO NOT WRITE "SAME AS LAST YEAR".** Review your additional insured list to see who really needs to be listed. Do not have names crossed out on your lists. Please retype if names are to be deleted or added. These lists must typewritten. With this letter and your renewal application you will find the format to be used in listing your additional insureds. Please be sure to identify all pages with your club name. Both lists need to contain complete mailing addresses for each additional insured.

IT IS ABSOLUTELY NECESSARY THAT YOU DIVIDE THE ADDITIONAL INSURED IN TO TWO CATEGORIES:

- a. **CONTRACTED CLUB LANDOWNERS FOR TRAIL EXPOSURE ONLY** - Will automatically provide coverage as an additional insured under a blanket additional insured endorsement at no additional premium. A complete list must be provided with the application and any changes must be submitted - **IN THE REQUIRED ATTACHED FORMAT.**
- b. **ADDITIONAL INSURED FOR OTHER THAN CLUB CONTRACTED TRAIL USAGE** - No automatic coverage. Provide a list with complete details; who, address, and why they need to be named with the application - **IN THE REQUIRED ATTACHED FORMAT.** A \$25.00 charge for each will apply when submitted with your application if approved by the company. A \$25.00 charge for each subject to a minimum endorsement charge of \$75 + surplus lines tax will apply for additions after the club is bound if approved by the company.

Item #3: The activity list is included with the application. Do not include club schedules/calendars, this makes it more difficult to review and delays processing of the application. The two allowed concession stands may be set up for a maximum of three days each. The scheduled dates of the concession stand must be provided. If a concession lasts longer than three days, it will need to be quoted. EMC Underwriters LLC will review these on an individual basis and provide a quote.

Item #4: Sponsoring of Conventions, Flea Markets, Festivals, Snoddeos, Play Days, Charity Events and any event not listed in the schedule of automatically covered activities shown on the application or combining activities together creating an event will require a special application for each event listing all activities to be held. Acceptability will be determined by the company and an additional charge will apply. The application needs to be in our office at least two weeks prior to the event.

Item #5: Rides given to other people, i.e., Easter Seal, handicapped, kids, etc. must be looked at individually. A special application will need to be completed and in our office at least two weeks prior to the event for us to obtain company approval before we are able to bind coverage. The additional premium will be based upon the details of the activity.

Item #6: Applications for short-term drag races, hill climbs, water skips, cross country races, sled dog races, etc. must be in our office at least two weeks prior to event for us to obtain company approval before we are able to bind coverage. Minimum age limit for participants is 18 years old. A short-term liability application must also be submitted for Kitty Cat events. This is a spectator liability coverage only.

Item #7: Amending the policy after receipt of the application by the company will result in an amendment fee. This will be a minimum charge of \$75.00 plus the application taxes. Be sure all activities scheduled and non-scheduled and additional insureds are on the application form. Any activities or additional insureds not listed will not be covered.

Item #8: There will be no short-term prorated premiums. All policies are 100% minimum "EARNED Annual Premium" and such will be charged a full year's premium.

Item #9: There is no premise liability or building coverage included: however, premise liability may be endorsed for an additional premium after submission of a separate application form that can be obtained by contacting our office. Building coverage may also be obtained with a separate application form that would include the description of the building including construction, protection class, protection devices, square footage, and complete description of what the building is used for. This would be rated separately. Both premise liability and building coverage is subject to company approval after review of the application form.

Item # 10: Increased limits requests need applications completed and in our office four weeks prior to renewal date. They will be rated individually as per activities and additional insureds.

It is important that your renewal be sent to the Department well before the renewal date to insure continuing coverage. Please allow us at least two weeks for processing and mailing time to get coverage in place. This is the same for amendments, short-term applications and groomer physical damage policies. All requests must go through our office.

Please review the "Snowmobile Club Liability Coverages" included.

If you have any questions after reading the information, please contact V &V Insurance at 563-547-2161.

CLUB NAME: _____

**LANDOWNERS AS ADDITIONAL INSURED FOR
CLUB CONTRACTED TRAIL USAGE ONLY**

COMPLETE NAME AND ADDRESS REQUIRED

NAME AND ADDRESS	NAME AND ADDRESS

If additional space is needed, please copy this form.

CLUB NAME: _____

**ADDITIONAL INSURED OTHER THAN FOR
CLUB CONTRACTED TRAIL USAGE ONLY**

COMPLETE NAME AND ADDRESS REQUIRED

NAME AND ADDRESS	NAME AND ADDRESS

If additional space is needed, please copy this form.

DALE G. VAGTS
V & V INSURANCE AGENCY, INC.
P.O. BOX 159
CRESCO, IOWA 52136

PHONE: 563-547-2161
FAX: 563-547-2046
E-MAIL: insurance@vandvins.com
WEBPAGE: www.vandvins.com

SNOWMOBILE CLUB LIABILITY INSURANCE APPLICATION

RENEWAL DATE: _____ STATE ASSOCIATION: _____

Is this club/association/council made up of other individual clubs (individual clubs must carry their own separate club liability for club sponsored activities)? If "Yes" is marked the following exclusion will apply to the following club's coverage when bound: It is hereby agreed and understood that "no coverage" exists for any activities of the individual clubs that make up this club/association/council.

____ Yes ____ No

CLUB NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DAYTIME PHONE: _____ CONTACT NAME: _____

FAX: _____ EMAIL ADDRESS: _____

NO. OF CLUB MEMBERS: _____ HOW MANY MILES OF TRAIL DO YOU MAINTAIN? _____

DOES CLUB OWN OR LEASE AN EMERGENCY SLED? _____ HOW MANY _____

DOES THE CLUB OPERATE A GROOMER? _____ HOW MANY _____

DOES THE CLUB OWN OR LEASE PREMISES OTHER THAN DESIGNATED TRAILS _____

IF YES, PLEASE ATTACH A SEPARATE SHEET DESCRIBING PREMISE AND ACTIVITIES HELD AT PREMISE.

DO YOU HAVE A PREMISE LIABILITY POLICY _____ CARRIER _____

POLICY NUMBER: _____ POLICY TERM _____

DO YOU WISH TO OBTAIN THIS COVERAGE FOR AN ADDITIONAL PREMIUM? YES _____ NO _____

CLUB PREMIUM \$ _____ GROOMER/TRAIL LIABILITY PREMIUM \$ _____

POLICY FEE: \$ _____ ADDITIONAL FEES AND TAXES: \$ _____

ADDITIONAL INSURED: LISTS MUST BE TYPED AND INCLUDE COMPLETE MAILING ADDRESS/ZIP CODES.

CONTRACTED CLUB LANDOWNERS FOR TRAIL EXPOSURE ONLY - WILL AUTOMATICALLY BE PROVIDED COVERAGE AS AND ADDITIONAL INSURED UNDER A BLANKET ADDITIONAL INSURED ENDORSEMENT AT NO ADDITIONAL PREMIUM. A COMPLETE LIST MUST BE PROVIDED WITH THE APPLICATION AND ANY CHANGES MUST BE SUBMITTED (**IN THE REQUIRED ATTACHED FORMAT**). NO ADDITIONAL PREMIUM DUE FOR ADDITION OR DELETION OF THESE LANDOWNERS AFTER CLUB IS BOUND.

ADDITIONAL ISURED FOR OTHER THAN CLUB CONTRACTED TRAIL USAGE - NO AUTOMATIC COVERAGE. PROVIDE A LIST WITH COMPLETE DETAILS - WHO, ADDRESS AND WHY THEY NEED TO BE NAMED WITH THE APPLICATION (**IN THE REQUIRED ATTACHED FORMAT**). A \$25.00 CHARGE FOR EACH WILL APPLY WIHEN SUBMITTED WITH THE APPLICATION IF APPROVED BY THE COMPANY. FOR ADDITIONS AFTER THE CLUB HAS BEEN BOUND, THERE WILL BE A \$25.00 CHARGE FOR EACH SUBJECT TO A MINIMUM ENDORSEMENT CHARGE OF \$75.00 + SURPLUS LINES TAX, IF APPROVED BY THE COMPANY.

ACTIVITY CHECK LIST

(This group of individual club activities are acceptable during the club policy term and are included in the club's premium)

General Membership/Club Meetings
Board Meetings/Chapter Meetings
** Annual Conventions/State Conventions
(Attending not sponsoring event)
Snowmobile Trail Rides/Club Rides
Poker Runs/Fun Runs
Safety Classes
* Radar Runs
Displays/Booths/Raffles
Banquets/Landowner Dinners
Dances (excluding street dances)

Scavenger Hunts
** Flea Market
(Attending not sponsoring event)
Swap Meet
Parades
Hay Rides
Camp-Outs
Christmas Party
Club Cook Outs/Picnics/Chili Feeds/Dinners
Pancake Breakfast
Christmas Tree Sales

***Regarding Radar Runs – coverage is hereby warranted for this event that no one under 18 is allowed to participate.**

Coverage applies only to those specifically scheduled activities listed above. Any events not listed on this application but planned at a later time will be considered an endorsement and require an additional fee to add to the club's activity list. Please refer to the renewal letter items #3 through #7 for more information.

Additional Activities

_____ Trail Maintenance
_____ Trail Grooming

_____ MUST HAVE DATES FOR THE FOLLOWING EVENT:

_____ DATES (mm/dd/yy)

_____ Concession Stand - two times only
(See letter item #3)

****If sponsoring Conventions, Festivals, Snodeos, Playdays, Flea Markets, Charity Event, Giving Rides, Snowmobile Burn Out, Water Skip, Cross Country Snowmobiling, and any event not listed in the schedule of automatically covered activities shown on the application or combining activities together creating an event –will require a special application for each event listing all activities to be held. ACCEPTABILITY DETERMINED BY THE COMPANY AND AN ADDITIONAL CHARGE WILL APPLY.**

RACE ACTIVITIES REQUIRE A SHORT TERM LIABILITY APPLICATION TO BE SUBMITTED TO OUR OFFICE 14 DAYS PRIOR TO THE EVENT. THERE IS NO AUTOMATIC COVERAGE UNDER THIS POLICY. MINIMUM AGE LIMIT FOR PARTICIPANTS IS 18 YEARS OLD. KITTY KAT EVENTS ALSO REQUIRE A SEPARATE APPLICATION FORM.

ATV EVENTS CANNOT BE CONSIDERED UNLESS THE CLUB IS A SNOWMOBILE/ATV CLUB AT INCEPTION OF CLUB COVERAGE.

COVERAGE IS NOT BOUND UNTIL THIS APPLICATION IS RECEIVED, QUOTED, AND ACCEPTED BY EMC UNDERWRITERS LLC AND PREMIUM PAYMENT IS RECEIVED AT V & V INSURANCE AGENCY. THERE IS NO AUTOMATIC COVERAGE.

SIGNED: _____ DATE: _____

CLUB OFFICER

SNOWMOBILE CLUB/ATV CLUB SUPPLEMENT

1. SNOWMOBILE CLUB/ATV CLUB ACTIVITIES

SNOWMOBILE AND ATV ACTIVITIES – Does each have their own designated season during the year

YES _____ NO _____

If YES, when do the seasons normally run?

Snowmobile Season _____ ATV Season _____

If NO explain: _____

2. DOES THE CLUB MAINTAIN THE TRAILS FOR:

SNOWMOBILE: YES _____ NO _____ **ATV:** YES _____ NO _____

If answer is NO, provide the name and address of the entity who is responsible for the maintenance.

Name: _____

Address: _____

DO THEY OPERATE OR MAINTAIN ANY ATV PARKS? YES _____ NO _____

If YES please provide complete details and a separate sheet and attach to this application.

3. TRAILS

Are all of the ATV trail miles on existing snowmobile trails? YES _____ NO _____

If YES, do they ever use them at the same time? YES _____ NO _____

If NO, are they ATV designated trails only? YES _____ NO _____

1. IS THERE SPECIFIC SIGNAGE FOR:

Snowmobile trail usage? YES _____ NO _____

ATV trail usage? YES _____ NO _____

IS THIS CLUB RESPONSIBLE FOR PUTTING UP THE SIGNAGE FOR:

Snowmobile trails? YES _____ NO _____

ATV trails YES _____ NO _____

If NO, provide the name and address of the entity who is responsible for the signage.

Name: _____

Address: _____

ACTIVITIES COVERED WILL FOLLOW ONLY THE ACTIVITIES SHOWN ON THE SCHEDULE OF SPECIFICALLY COVERED ACTIVITIES FOR THIS CLUB.

V & V INSURANCE AGENCY, INC
Dale G. Vagts, Agent
PO Box 159
Cresco, IA 52136

Phone: 563-547-2161
FAX: 563-547-2046
Email: insurance@vandvins.com
WEBPAGE: www.vandvins.com

RETURN COMPLETED APPLICATION TO OUR OFFICE AT LEAST TWO WEEKS PRIOR TO EVENT

SNOWMOBILE/ATV PROGRAM SPECIAL EVENT APPLICATION

1. Applicant: _____ Applicant is: ☐ Individual ☐ Corporation
☐ Partnership ☐ Other
Mailing Address _____

Phone: _____ FAX: _____ Email: _____ Website: _____

2. Coverage Date Requested: _____ to: _____ Dates of Special Event: _____

3. Name of Event: _____ Location of Event: _____

4. Estimated Attendance Per Day: _____ Gross Receipts: _____

Description of "All" Activities to be covered for this event. A DETAILED COMPLETE SCHEDULE OF ALL ACTIVITIES WITH DATES. COVERAGE IS VERY SPECIFIC, IF THE ACTIVITY IS NOT SCHEDULED, IT WILL **NOT** BE COVERED. (Attach separate page if necessary)

**If A Brochure or Flyer with the schedule of activities is available please attach to this application.

<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
<input type="checkbox"/>	_____	<input type="checkbox"/>	_____

Are certificates of insurance obtained naming the insured as Additional Insured for any of the above activities?

YES _____ NO _____ If YES, which activities – Mark above with an X.

Is there a carnival and amusement ride exposure? YES _____ NO _____

Is a certificate of insurance obtained naming the insured as an Additional Insured for this exposure? YES _____ NO _____

5. Are there vendors at this event? YES _____ NO _____ How many? _____
What types of vendors? Craft Vendors # _____, Food Vendors # _____, Display Booth Vendors # _____, Dealers # _____,
Other Vendors # _____
Do all vendors provide to the insured club, insurance certificates? YES _____ NO _____
Do the name the insured club as additional insured? YES _____ NO _____

6. Is there campground exposure at this event? YES _____ NO _____
Is the insured club responsible for this campground during their event? YES _____ NO _____
If YES, answer the following:
Number of camping spaces? _____ Electrical Hookups? YES _____ NO _____
Are Shower and Restrooms available? YES _____ NO _____ Playgrounds? YES _____ NO _____

7. LIMITS OF COVERAGE FOR THIS EVENT IF BOND, WOULD BE INCLUDED WITHIN THE CLUBS CURRENT COVERAGE LIMITS.

8. Do they need any Additional Insureds? YES _____ NO _____
Name and complete address of Additional Insured:

Why do they need to be named: _____

9. Has similar insurance been purchased in the past YES _____ NO _____
If YES, advise name of prior insurance company _____ Premium _____

VEHICULAR ACTIVITY QUESTIONNAIRE - COMPLETE IF ACTIVITIES FOR THE EVENT INCLUDE THIS EXPOSURE.

Type of Activity _____ Date of Activity _____

Location of Activity _____

REQUIREMENT TO CONSIDER THIS EVENT: MINIMUM AGE OF DRIVERS IS 18 YEARS OLD. Do they allow anyone under 18? YES _____ NO _____

Are there specific rules and guidelines required and followed for this activity? YES _____ NO _____

If YES, please advise **complete details** or attach a copy of Rules and Guidelines.

Spectator Seating Arrangements:

1. Type of Seating: ☐ Grandstands ☐ Bleachers ☐ Other _____
2. Construction: ☐ Wood ☐ Concrete ☐ Steel ☐ Other _____
3. Approximate age of grandstands/bleachers: _____
4. Seating capacity: _____
5. Distance between seating and track: _____ feet. REQUIREMENT: 50 FEET MINIMUM DISTANCE.
Do they meet minimum? YES _____ NO _____
6. Is seating elevated from track? YES _____ NO _____ If YES, how much? _____ feet.
7. Are spectators permitted in the pit area? YES _____ NO _____ (spectators in pit are excluded from coverage)

Spectator Protection:

1. Is there protection between track and spectators? YES _____ NO _____
If YES, type of protection: ☐ Guard Rail ☐ Fence ☐ Other _____
Construction materials used: _____
IF USING SNOW FENCE OR A SIMILAR TYPE OF FENCING, BAILS OR THREE STACK HIGH TIRES ARE REQUIRED IN ADDITION TO THE FENCE. SNOW BERMS ARE NOT ACCEPTABLE BARRIERS.
2. Are anchor posts used in the above protection? YES _____ NO _____
If YES, Height: _____ feet, thickness _____ inches, distance between posts: _____ feet
Depth that posts are set in ground _____ feet, concrete used: YES _____ NO _____
3. Does the protection describe above encircle racing area? YES _____ NO _____
4. Is the protection described above also provided between track and spectator parking area? YES _____ NO _____

PLEASE INCLUDE A DIAGRAM OF EVENT AREA ON A SEPARATE SHEET OF PAPER.

IF THIS EVENT IS CANCELED, YOU MUST NOTIFY, EITHER BY FAX OR PHONE, V & V INSURANCE AGENCY NO LATER THAN THE MORNING THE EVENT IS SCHEDULED TO BE CONSIDERED FOR A POSSIBLE REFUND OF YOUR SHORT TERM LIABILITY INSURANCE PREMIUM. THE DATE AND TIME OF YOUR CALL MUST BE INCLUDED IF YOU LEAVE A MESSAGE ON OUR ANSWERING MACHINE.

Applicant Signature

Date

Agent Signature

Date

Underwriter: EMC Underwriters, LLC

SNOWMOBILE CLUB LIABILITY COVERAGES

Club Liability

Covers club sponsored activities, such as regular meetings, cookouts, charity functions and trail rides. Also provides coverage for club trails maintained and operated under easement agreements and for individual members while performing duties on behalf of the club.

Coverage is not provided for club owned or leased land or building except for office purposes and/or club sponsored events for which the public is charged admission. Coverage may be obtained to include these exposures at an additional premium.

Coverage is not provided for racing of any type. These activities require a separate short term event application for spectator liability. (See next page for additional exclusions).

This is liability coverage only and does not cover any comprehensive or collision coverage to the groomer. Physical damage coverage may be obtained under a separate policy.

Limit of Liability and Premiums

We will provide \$1,000,000 occurrence/\$1,000,000 general aggregate Bodily Injury and Property Damage Liability per member club. If your club owns/operates a trail groomer, we will include this exposure for an additional premium per groomer.

Commercial Grooming Machines

If you are grooming trails under a contract agreement, you need to notify V & V Insurance Agency as this may be a commercial operation and increase your liability. This does not include you own club trails for which you are being paid by a government contract.

Contractual Liability

If you are grooming county trails under a Snowmobile Maintenance Contract, terms of the contract may impose additional liability upon your club. The contract may contain a "hold harmless" clause, in which the club agrees to assume the liability of the county for their grooming operations. In this case, the club would have an exposure to contractual liability, which is NOT included automatically in this policy. **YOU MUST ATTACH A COPY OF THE CONTRACT ALONG WITH THIS APPLICATION FOR OUR REVIEW.**

Additional Insureds

Additional insureds will be added on to our policy at an additional charge. See your renewal letter concerning the premium charge.

Generally Speaking

The State Association will be issued the master policy: each participating member club will be endorsed on to the master. The policy is a Commercial General Liability Policy and will include products and host liquor liability.

-EXCLUSIONS-

Spectator Liability Endorsement

It is agreed that such insurance as is provided by this policy does not apply to:

- (a) any injury or damage sustained by any athletic participant, attendant or official or to any person employed on or about the premises;
- (b) the property of any of the foregoing or to any property in the insureds care, custody or control, unless so endorsed hereon;
- (c) any injury or damage sustained by any authorized or unauthorized person while in the activity area, such as but not limited to: (rodeo) chute, corral, arena; (racing) race track, pit area, etc.;
- (d) claims arising out of the ownership, maintenance, use or operation of aircraft landing strips, runways or fields designed or designated as an aircraft landing and/or take off area.

Participants Exclusion

In consideration of the premium charged, it is understood and agreed that participants are specifically excluded from all coverage provided by this policy. This exclusion applies to all insured activities, before, during and after the insured event(s).

Definition of Participant

"Participant" means any person on the premises for the purpose of competing or taking part in any activities being conducted on the premises. This includes any person on the premises for the purpose of providing support to a person competing or taking part in the activities. Any person within this definition is considered a "participant" at all times while on the premises. "Participant" is distinguished from and does not include a spectator who is on the premises solely for the purpose of observing the activities being conducted.